

**Application Packet for**  
**Certified**  
**Texas Emergency**  
**Manager<sup>©</sup>**  
**CEM<sup>®</sup> Reciprocity Version**



**Sponsored by:**

**The Emergency Management  
Association of Texas**

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**Administered by:**

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## The Emergency Management Association of Texas

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## Preface

### BOARD OF DIRECTORS OFFICERS

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This document describes the requirements and standards of the Texas Emergency Manager (TEM<sup>®</sup>) certification program and serves as the basis for your application packet. This certification program is sponsored by the Emergency Management Association of Texas (EMAT) and is administered by the Emergency Administration and Planning Program and Center for Public Management (EADP), University of North Texas. You do not have to be a member of either organization in order to be certified.

EMAT and EADP are both dedicated to promoting the goals of saving lives and protecting property through application of the four phases of emergency management. One method shown to increase professionalism and recognize the individual who possesses the knowledge, skills, abilities and experience to effectively manage a comprehensive emergency management program is through a rigorous certification program. The TEM<sup>®</sup> is just such a program.

EMAT reviewed the certification programs of numerous states and associations and decided to base the TEM<sup>®</sup> on the International Association of Emergency Manager's Certified Emergency Manager (CEM<sup>®</sup>) program. The CEM<sup>®</sup> program was chosen for three reasons. The first reason is that it is a comprehensive evaluation of an emergency manager's knowledge, skills and abilities through an internationally recognized certification program. The second reason is that the program was developed with assistance and input from practicing emergency managers throughout the United States, academia, and FEMA. The third reason is that the State of Texas considers an individual designated as a CEM<sup>®</sup> who has completed the Basic Emergency Management Workshop to meet the training requirements at the Advanced Preparedness Level (*DEM 100, June 2000, page 8*).

The TEM<sup>®</sup> certification program modifies the CEM<sup>®</sup> requirements by adding Texas-unique requirements, such as experience and exercise/disaster event participation. A second difference is that the TEM<sup>®</sup> does not require a college degree for certification. EMAT recognizes that many emergency managers never had the opportunity to attend college, yet possess the knowledge, skills and abilities to effectively manage a comprehensive emergency management program. The TEM<sup>®</sup> addresses that situation. As the experienced emergency managers retire and the new crop of college-educated emergency managers take over this requirement will change.

Certification is an indicator of experience, hard work, continuing education, dedication to integrity, and creativity. It is also an assurance that the individual has passed at least a minimum screening of competence. Obtaining certification as a TEM<sup>®</sup> proves that you can effectively accomplish the goals and objectives of comprehensive emergency management in Texas.

# EMAT CODE OF PROFESSIONAL CONDUCT

## Introduction

The Emergency Management Association of Texas (EMAT) is a nonprofit organization dedicated to promoting and advancing the professionalism of emergency management and disaster preparedness in Texas.

EMAT sponsors the Texas Emergency Manager (TEM<sup>®</sup>) certification program to document and strengthen the professionalism of Texas emergency managers.

## The Purpose of the Code

The Code of Professional Conduct must be embraced and upheld by all individuals who are awarded the TEM<sup>®</sup> certification. The candidate's promise to uphold the Code signifies the assumption that the certified Texas Emergency Manager will act prudently and responsibly beyond the requirements of law and codes.

## Enforcement of the Code

The EMAT Executive Board enforces the Code by receiving and investigating all complaints of violations and by taking the necessary action, as appropriate, including but not limited to the revocation of an individual's TEM<sup>®</sup> certification.

## The Code of Professional Conduct

The Code embodies the TEM<sup>®</sup> certification program philosophy and objectives. Each TEM<sup>®</sup> promises to:

- ❖ Accept and dutifully carry out all associated responsibilities incumbent upon their position of public trust;
- ❖ Serve the public with integrity and honesty in all matters;
- ❖ Promote public awareness toward and understanding of emergency preparedness and public protection.
- ❖ Foster excellence in emergency management by keeping abreast of pertinent issues;
- ❖ Enhance individual performance through continuing education and applied technology;
- ❖ Avoid conflict of interests resulting in personal gain or advantage or the perception thereof;
- ❖ Conserve and protect resources through effective use of funds, accurate assessment of potential hazards, and timely decision making;
- ❖ Maintain confidentiality of privileged information; and
- ❖ Share my work product with other TEMs<sup>®</sup> in order to expand the collective capability of the profession.

# TEM<sup>®</sup> APPLICATION COVER SHEET WITH CODE OF CONDUCT PLEDGE

**REMINDER: Type all Responses!**

1. Name: \_\_\_\_\_

2. Jurisdiction: \_\_\_\_\_

3. Current Position/Title: \_\_\_\_\_

4. Years in Current Position: \_\_\_\_\_

5. Years in Emergency Management: \_\_\_\_\_

6. I understand that certification is subject to EMAT Executive Board approval, and if granted, is current for a five year period. I will execute the necessary documents and supply any additional information as determined by EMAT. I further understand and, by my signature, I subscribe to the EMAT Code of Professional Conduct with the knowledge that any false statement or misrepresentation I make in the course of these proceedings may result in the revocation of this application and the issuance of a complaint of violation.

Candidate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# TEM<sup>®</sup> CERTIFICATION SUBMISSION CHECKLIST

## CEM<sup>®</sup> RECIPROCITY

*Use this checklist to ensure your submission is complete.*

### A. Completed Application Cover Sheet with Code of Conduct Pledge:

\_\_\_ *Requires Signature.*

### B. Current CEM<sup>®</sup> Certification

\_\_\_ *Requires a copy of the current CEM<sup>®</sup> certificate issued by IAEM (formerly NCCEM).*

### C. Completed Credentials Packet:

\_\_\_  Work History

*Requires 2 years experience and a full-scale exercise or actual disaster experience in Texas and copies of position descriptions or supervisor statements.*


\_\_\_  References

*Requires names and current Texas contact information.*

\_\_\_  Contributions to the Profession

*Requires documentation or contact information where requested for three contributions made in Texas.*

### D. Miscellaneous:

\_\_\_  Type All Materials (unless otherwise specified, such as a signature and copies of supporting documentation.)

\_\_\_  Fees Payment Enclosed – Pay to the Order of EMAT

*Check or money order accepted -- DO NOT SEND CASH.*

*Application packet and payment mailed to EADP, University of North Texas.*

Please Print Name: \_\_\_\_\_

# TEM<sup>®</sup> CREDENTIALS PACKET

**This portion of the certification process is designed to:**

- I. Verify the currency of the candidate's CEM<sup>®</sup> certification.
- II. Verify the candidate's work history and experience in Texas.
- III. Review references submitted by candidate.
- IV. Document support of and contributions to the emergency management profession in Texas.

Submit all credentials application information on the appropriate forms, if directed. Submit all requested components in one complete package. Duplicate the forms as often as necessary. All required signatures must be original (preferably in blue ink).

Submit only enough documentation to insure a favorable review. Certification Reviewers will consider brevity favorably. To enhance your document review, submit the most current information possible. Do not document your entire history in emergency management.

## **I. CURRENT CEM<sup>®</sup> CERTIFICATION**

To satisfy this requirement a candidate must attach a copy of the current CEM<sup>®</sup> certificate that is less than five years old.

## II. WORK HISTORY AND EXPERIENCE

To satisfy this requirement a candidate must demonstrate:

- ⇒ Two years full-time (2,000 hours per year or more) experience in a comprehensive emergency management position served in Texas; **and**
- ⇒ Meaningful role in the development and/or participation in a full scale exercise in Texas, **OR**
- ⇒ Actual disaster and recovery management experience in Texas that necessitated activation of local emergency plans.

That is, candidates must complete IIA., below, and **either** IIB. or IIC.

Candidate must submit a copy of his/her **CURRENT** position description. If credit for the disaster/emergency management experience is from a **PREVIOUS** job or role, submit a copy of the position description (s) with the dates of service. If a current position does not exist, or if a copy needed from a previous job is not available, so state in a brief letter signed by the candidate, attached to a signed letter/statement from the current (or past) supervisor that states that (1) a position description does not exist, has been changed, or is unavailable, and (2) outlines (a) the disaster/emergency management functions performed by the candidate, (b) the dates of this service, and (c) the approximate amount of time spent in disaster/emergency management duties.

Time spent on volunteer/internship duties may also be counted, but applicants must provide documentation of the total time devoted to disaster/emergency management duties.

Candidates may utilize the same position for a period of two years or any combination of positions.

Complete the enclosed appropriate form(s) to prove your exercise or actual occurrence experience.

### IIA. WORK HISTORY

Job Title: \_\_\_\_\_ Period Covered \_\_\_\_\_

Job Title: \_\_\_\_\_ Period Covered \_\_\_\_\_

Job Title: \_\_\_\_\_ Period Covered \_\_\_\_\_

Job Title: \_\_\_\_\_ Period Covered \_\_\_\_\_



**IIC. EXPERIENCE -- NOTE: Complete IIA., and either IIB. OR IIC.**

**Actual Occurrence/Disaster and Recovery Management Participation in Texas, If Applicable**

Describe Activity (be specific): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe Your Role (be specific): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

Describe the Mitigation Activities Undertaken as a Result of Lessons Learned from this Activity:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

### III. CANDIDATE REFERENCE REQUIREMENT

Each candidate must submit the names of three references, and information on their reference sources, as requested below. **NOTE: Let your reference sources know they are being so listed, because verification calls will be made to verify the information.**

A. Reference sources that qualify are:

- ⇒ Current supervisor (Mandatory)
- ⇒ A past supervisor (within 5 years)
- ⇒ Local, state or federal government officials or department heads (including RLOs)
- ⇒ Emergency service organization officials (e.g., public, private, military, tribal, etc.)
- ⇒ Local, regional or national emergency management association officials

B. Reference sources that do not qualify are:

- ⇒ A subordinate or peer
- ⇒ A former student
- ⇒ Friends, relatives or neighbors

1. REFERENCE NAME/TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/ST/ZIP \_\_\_\_\_

PHONE/FAX/EMAIL \_\_\_\_\_

2. REFERENCE NAME/TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/ST/ZIP \_\_\_\_\_

PHONE/FAX/EMAIL \_\_\_\_\_

3. REFERENCE NAME/TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/ST/ZIP \_\_\_\_\_

PHONE/FAX/EMAIL \_\_\_\_\_

#### IV. PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT

The concept of professionalism is ultimately defined as one's contributions to the profession. Candidates can list any and all activities giving special consideration to the most recent activities.

While many of the categories do not require specific verification documenting activity, contact information is solicited and will be checked.

**The following activities qualify for submission. A valid and verifiable submission in at least three (3) categories completed while serving in Texas is necessary to meet this requirement.**

- A. Active membership in an emergency management-related professional organization for at least three years. These professional organizations include: the Emergency Management Association of Texas, Texas Gulf Coast Emergency Management Association, Capital Area Emergency Management Association, Coastal Bend Emergency Management Association, South Central Emergency Management Association, American Public Works Association, American Society for Public Administration, American Society of Professional Emergency Planners, International Association of Emergency Managers, International Association of Chiefs of Police, International Association of Fire Chiefs, International City Management Association, National Emergency Management Association, National Fire Protection Association, and/or the American Civil Defense Association.
- B. Attend a state, regional or national educational session meeting or emergency management-related conference.
- C. Serve as an active member on a Board, a Committee, a task force, or a special project for a professional, emergency management or a jurisdictional organization.
- D. Serve for at least one term as an Officer or in a leadership position on a Board, a Committee, a task force, or a special project for a professional, emergency management or a jurisdictional organization.
- E. Complete a special assignment or project for a jurisdictional or governmental committee or task force addressing emergency management issues. An example would be a special assignment or project for the county, LEPC, DEM, FEMA, or EMI. The resulting product or decisions must make a significant contribution to or impact on the emergency management profession.
- F. Develop and participate in an educational or informational speaking engagement on an emergency management issue at a professional conference or public forum (including conferences, workshops, radio, television, educational video, etc.).
- G. Complete a teaching or instructing commitment on an emergency management-related topic for a minimum of three actual platform hours
- H. Serve as a Developer, Evaluator or Controller for either a full-scale, functional, or tabletop exercise or complete a disaster assignment outside the candidate's jurisdiction. Demonstrate a significant role in the exercise or assignment and describe the lessons learned as a result of participation.

- I. Write and have published (in print or on the Internet) an emergency management article, research project, brochure, or instructional pamphlet.
- J. Develop and distribute a completed audio, video, audio-visual or computer software project directly related to emergency management.
- K. Receive an award or special recognition in the field of emergency management by an outside agency, organization or association.
- L. Complete a significant role as a full partner in the development or extensive revision of a course in emergency management offered at the state, national, or international level.
- M. Testify before a legislative body or contact an elected representative (the candidate must receive a written reply from the contact), at the national or state level, on any emergency management-related issue.
- N. Other contributions must be approved in advance by the Certification Commission. Examples include participation in TEM<sup>®</sup> Field Test, participation in invitation-only conferences and workshops, or service on EMI Board of Visitors.

*NOTE: Submit multiple examples where possible. Submit all information on the appropriate form. Duplicate forms for multiple submissions and utilize additional pages as necessary.*

*Since this segment reflects contributions of and support to the field of emergency management, these submissions reflect activities over **and** above basic job requirements.*

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- A. **Professional Membership** – Maintain an active membership in an emergency management-related professional organization for at least three years. These professional organizations include: the Emergency Management Association of Texas, Texas Gulf Coast Emergency Management Association, Capital Area Emergency Management Association, Coastal Bend Emergency Management Association, South Central Emergency Management Association, American Public Works Association, American Society for Public Administration, American Society of Professional Emergency Planners, International Association of Emergency Managers, International Association of Chiefs of Police, International Association of Fire Chiefs, International City Management Association, National Emergency Management Association, National Fire Protection Association, and/or The American Civil Defense Association.

To satisfy this requirement, a candidate must provide contact information for the professional organization. A candidate may submit more than one organization for a given year.

Name of Organization: \_\_\_\_\_  
\_\_\_\_\_

Contact Phone Number/Name: \_\_\_\_\_  
(list name and phone # of authorized Association agent.)

Membership Year(s): \_\_\_\_\_

Name of Organization: \_\_\_\_\_  
\_\_\_\_\_

Contact Phone Number/Name: \_\_\_\_\_  
(list name and phone # of authorized Association agent.)

Membership Year(s): \_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- B. Professional Development** -- Attend a regional, state, or national emergency management-related educational session meeting or conference.

To satisfy this requirement, a candidate must demonstrate attendance (e.g. badge, roster, etc.) For each meeting attended, the candidate must complete the required information; utilize as many forms as required.

Name and Date of Meeting: \_\_\_\_\_

\_\_\_\_\_

Session(s) Attended: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and Date of Meeting: \_\_\_\_\_

\_\_\_\_\_

Session(s) Attended: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- C. **Service Role** -- Serve for at least one term as an active member on a board, a committee, a task force, or a special project for a professional, emergency management, or a jurisdictional organization.

To satisfy this requirement, a candidate may utilize one single service role or any combination of organizations.

Name of Organization: \_\_\_\_\_

\_\_\_\_\_

Description of Role: \_\_\_\_\_

\_\_\_\_\_

Time Frame/Length of Service: \_\_\_\_\_

\_\_\_\_\_

Name of Organization: \_\_\_\_\_

\_\_\_\_\_

Description of Role: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Time Frame/Length of Service: \_\_\_\_\_

\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- D. **Officer or Leadership Role** – Serve for at least one term as an officer or in a leadership position on a board, a committee, a task force, or a special project for a professional, emergency management or a jurisdictional organization.

To satisfy this requirement, a candidate must demonstrate an officer or board leadership role, utilizing one single leadership role or any combination of organizations.

Name of Organization: \_\_\_\_\_

\_\_\_\_\_

Description of Role: \_\_\_\_\_

\_\_\_\_\_

Time Frame/Length of Service: \_\_\_\_\_

\_\_\_\_\_

Name of Organization: \_\_\_\_\_

\_\_\_\_\_

Description of Role: \_\_\_\_\_

\_\_\_\_\_

Time Frame/Length of Service: \_\_\_\_\_

\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- E. **Special Assignment** – Complete a special assignment or project for a jurisdictional or governmental committee or task force addressing emergency management issues. An example would be a special assignment or project for the county, LEPC, DEM, FEMA, or EMI. The resulting product or decisions must make a significant contribution to or impact on the emergency management profession.

To satisfy this requirement, a candidate must describe special assignment service on a jurisdictional or governmental committee or task force addressing the emergency management issue. The candidate must demonstrate that the resulting product or decisions make a significant contribution or impact.

Committee/Task Force Title: \_\_\_\_\_

Sponsoring Organization (be specific): \_\_\_\_\_

Individual who can verify service: \_\_\_\_\_

(please provide contact name and telephone number.)

Description of Charge/Assignment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of Product/Contribution to Field: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- F. **Public Speaking** — Develop and participate in an educational or informational speaking engagement on an emergency management issue at a professional conference or public forum (including conferences, workshops, radio, television, educational video, etc.). The candidate must be the presenter and not someone who wrote the presentation for others.

Description and Length of Engagement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Individual who can verify service: \_\_\_\_\_

(please provide contact name and telephone number.)

Location and Date of Activity: \_\_\_\_\_

\_\_\_\_\_

Description and Length of Engagement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Individual who can verify: \_\_\_\_\_

(please provide contact name and telephone number.)

Location and Date of Activity: \_\_\_\_\_

\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

**G. Teaching or Instructing** — Complete a teaching or instructing commitment on an emergency management-related topic for a minimum of three actual platform hours.

Description and Length of Engagement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Individual who can verify service: \_\_\_\_\_

(please provide contact name and telephone number.)

Location and Date of Activity: \_\_\_\_\_

\_\_\_\_\_

Description and Length of Engagement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Individual who can verify: \_\_\_\_\_

(please provide contact name and telephone number.)

Location and Date of Activity: \_\_\_\_\_

\_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

H. **Technical** — Serve as a Developer, Evaluator or Controller for either a full-scale, functional, or tabletop exercise or complete a disaster assignment outside the candidate's jurisdiction. Demonstrate a significant role in the exercise or assignment and describe the lessons learned as a result of participation.

Description of Exercise/Assignment: \_\_\_\_\_

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Role Served: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Individual who can verify service: \_\_\_\_\_

(please provide contact name and telephone number.)

Location and Date of Activity: \_\_\_\_\_

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Lessons Learned: \_\_\_\_\_

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**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- I. **Publication** — Write and have published (in print or on the Internet) an emergency management article, research project, brochure, or instructional pamphlet. The publication must have an independent editorial review and be published in a medium beyond the candidate's control. For example, staff documents and internal reports will not qualify.

To satisfy this requirement, a candidate may submit the name/title of a publication for which he/she had primary or secondary authorship.

Title: \_\_\_\_\_

Publication Source: \_\_\_\_\_

\_\_\_\_\_

Publication Date: \_\_\_\_\_

Check one --

Primary Authorship - **OR** -  Secondary Authorship

NOTE: Attach a copy of the article, brochure, or pamphlet.

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

**J. Audio, Video, Audio-Visual & Computer Products** — Develop and distribute a completed audio, video, audio-visual or computer software project

Title: \_\_\_\_\_

\_\_\_\_\_

Date of Production: \_\_\_\_\_

Sponsoring Organization (be specific): \_\_\_\_\_

\_\_\_\_\_

Description of Product: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of its Significant Contribution(s) to the Emergency Management Field (include reference to product audience):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NOTE: The description of the product will suffice. Please do not submit the actual product, unless specifically requested to do so by EMAT.

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- K. Award or Special Recognition** -- Receive an award or special recognition in the field of emergency management by an outside agency, organization or association.

To satisfy this requirement, a candidate may submit any award, honor, or special recognition received within the emergency management community or in conjunction with an emergency preparedness activity.

Verification of Award/Honor: Any proof documenting award and date is suitable.

Describe the Award/Honor and your role and contribution which led to your selection as the recipient (be specific):

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Date of Award/Honor: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- L. **Emergency Management Course Development** — Complete a significant role as a full partner in the development or extensive revision of a course in emergency management offered at the state, national, or international level.

To satisfy this requirement, a candidate must describe the significant role played in the development or extensive revision of the course.

Course Title: \_\_\_\_\_

Sponsoring Organization (be specific): \_\_\_\_\_

Individual who can verify service: \_\_\_\_\_

(please provide contact name and telephone number.)

Description of Emergency Management Course: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of Significant Role: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT

- M. **Legislative Contact** — Testify before a legislative body or contact an elected representative, (the candidate must receive a written reply from the contact), at the national or state level, on any emergency management-related issue.

Please submit a copy of written documentation proving personal testimony or a copy of the letter and the reply. EMAT will not award credit without this documentation.

**IV. CANDIDATE PROFESSIONAL CONTRIBUTIONS TO AND SUPPORT OF THE FIELD OF EMERGENCY MANAGEMENT**

- N. **Other** — Must be approved in advance by the EMAT Executive Board. Examples include participation in TEM<sup>®</sup> Field Test, participation in invitation-only conferences and workshops, or service on EMI Board of Visitors. Be creative with submissions within this category.

Describe Activity or Program Specifically Providing Dates, Program Sponsor, Program Audience and Any Other Pertinent Description:

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Describe Your Role or Involvement: \_\_\_\_\_

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Identify Why this Activity Makes a Contribution to the Field of Emergency Preparedness and it is, therefore, Applicable to this Portion of the TEM<sup>®</sup> Process:

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